



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

Public Health Preparedness and Response UPDATE

Keeping You Informed

December 2003

DSR drill prepares DHSS employees

An earthquake of 7.9 on the Richter scale hits southeastern Missouri; injuries and mass casualties are reported; major flooding is occurring in the St. Louis area and southeastern Missouri; a nuclear power plant detects higher levels of radioactivity; cold, frigid weather poses hypothermia concerns; communications are down; roads and bridges are closed; hospitals quickly reach maximum capacity; and panic strikes the eastern half of the state. All of these public health emergencies occurred in the first four-hour shift of the Department of Health and Senior Services' (DHSS) Department Situation Room drill held November 24-26 in Jefferson City. Six teams of DHSS staff were each activated for four hours during the three-day drill. Employees used their knowledge, analytical skills and available resources to make quick, yet deliberate decisions on how to best protect Missouri's residents. The scenario tested all facets of the Department Situation Room (DSR) response capabilities and included biological, chemical, radiological/nuclear and natural disasters.

"The DSR employees worked well as a team and dealt with multiple situations in a tight timeframe," said Paula Woodsmall, DSR Coordinator in the DHSS Center for Emergency

Response and Terrorism. "Although we gained some valuable 'lessons learned,' it was a very good exercise overall."

State of Nebraska Visits DHSS

Dignitaries from the state of Nebraska visited DHSS on December 19 to learn more about the department's emergency preparedness resources. Their visit included touring the DHSS Department Situation Room, mobile command center, public information mobile unit and State Public Health Laboratory. The DHSS environmental and communicable disease staff discussed Missouri's surveillance and epidemiological investigation capabilities. The group also met with the department's computer technology staff regarding the Health Alert Network, GIS and other emergency response capabilities.

Bioterrorism and Forensic Epidemiology

*by Ellen Ellick, Public Information Officer
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Maybe in the past a police detective could solve crimes without thinking much about infectious diseases.

And maybe public health's own disease detectives, known as epidemiologists, could

investigate outbreaks without wondering if terrorists were to blame.

But those days are gone, buried under a new vocabulary of bioterrorism. Words like anthrax, smallpox, ricin and pneumonic plague now pepper dialogues that include both public health and law enforcement.

People who seldom mingled in the past now have each other on speed dial.

One recent example of this greater coordination was the coming together December 2 and 3 of more than 300 law enforcement and public health officials in St. Louis for a course called Bioterrorism and Forensic Epidemiology: Mutual Training for Law Enforcement and Public Health Officials on Investigative Responses.

Participants came from throughout Missouri and western Illinois to attend the course developed by CDC together with the U.S. Department of Justice (the FBI and the U.S. Attorney's Office).

Matt Drake, Assistant U.S. Attorney for the Eastern District of Missouri, announced that U.S. Attorney General John Ashcroft has asked that every federal jurisdiction hold a public health and law enforcement conference.

"With emerging bioterrorism threats, there are many issues that affect both disciplines" Drake said. "Law enforcement and public health must understand the skills that each brings to an investigation that may involve, for example, a deliberate contamination of a salad bar with salmonella."

Drake said similar courses will be offered at other locations in Missouri but that no specific dates have been set yet. There may also be additional courses in the St. Louis area he said.

One of the speakers at the St. Louis conference was Sgt. Vince Stehlin of the St. Louis

Metropolitan Police Department. Stehlin, who heads the department's Emergency Management Division, addressed a roomful of public health officials on "Criminal Investigation for Public Health Professionals."

While Stehlin faced the public health people, the law enforcement participants heard from Greg Evans, director of the Center for the Study of Bioterrorism and Emerging Infections at the St. Louis University School of Public Health. Evans spoke on "Public Health Epidemiology for Law Enforcement."

Speakers from the FBI, University of Missouri-Columbia, U. S. Attorney's Office and Johns Hopkins University also gave presentations.

Participants worked through several group scenarios, one involving an incident where a flight attendant believed she'd been contaminated with anthrax, and another involving a smallpox outbreak. Together law enforcement and public health officials discussed responses to the incidents as they unfolded on paper.

Stehlin said he has long been a firm believer in the need for law enforcement and public health to work more closely together. "Even before it was popular, I thought we needed a new mind set in the law enforcement community about how we needed to work with public health."

"We have a big need to work together," he added, predicting that the future will include more conferences, workshops and exercises that bring together public health and law enforcement.

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Our state and local public health mission is to protect the communities' health and the well-being of individuals of all ages by assuring the early detection and the rapid, coordinated response to all public health emergencies, both natural and deliberate.